



CITY OF UPLAND BUSINESS LICENSING SITE INSPECTION CHECKLIST

If you are applying for a new, renewing or have a change of ownership for a Commercial Business license, or you are acquiring an existing business, within the City of Upland, a Building Safety Department inspection of the business building/space is required prior to issuance of your Certificate of Occupancy. Once you have obtained the Certificate of Occupancy, you may obtain your Business License.

The inspection of your establishment will ensure that the building and commercial space provides a safe environment for patrons, customers and employees. For example, the building inspector will check the egress pathway to make sure the exits are not blocked and exit signage is visible and lighted, that the electrical panel, outlets and switches are identified and safe for use, and the building's aisles, hallways, corridors and restrooms are safe for use by individuals with disabilities.

Once your Business License application is reviewed by the City of Upland Planning Department, but prior to issuance of a Business License, you must schedule a Business License Site Inspection. You will NOT be able to obtain your Business License until the Site Inspection is performed and the inspector clears your building/space for occupancy.

On the following pages, you will find an Inspection Checklist to assist you in performing a 'SELF INSPECTION' in order to prepare your business building/space for inspection by the City of Upland Building Safety Department.

Please visit the Building Safety Department for further information and to schedule a Business License Site Inspection.



CITY OF UPLAND BUSINESS LICENSING SITE INSPECTION

Date: _____ Business Lic. Name and #: _____

Address: _____ Unit: _____ Zip: _____

Owner Name: _____ Owner Tel: _____ Email: _____

24 Hour Emergency Contact Name: _____ Tel: _____

1. Is all construction and remodeling at the business complete and approved by the City of Upland Building Department?	YES	NO	N/A	9. Are gas shut off valves clear of weeds, trash, storage, etc., and are they visible and accessible?	YES	NO	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>If NO, date corrected</i>				<i>If NO, date corrected</i>		
2. Is your address visible on the outside of the building/space, including the suite number, with contrasting background and numbers at least 5 inches in height?	YES	NO	N/A	10. Is your heating/air conditioning unit cleaned and new filters installed on a regular basis?	YES	NO	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>If NO, date corrected</i>				<i>If NO, date corrected</i>		
3. Are electrical outlets within 6 feet of a sink or water GFCI-protected?	YES	NO	N/A	11. Are equipment/mechanical rooms free of combustible storage?	YES	NO	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>If NO, date corrected</i>				<i>If NO, date corrected</i>		
4. Are all electrical breaker panels accessible (30" in width, 36" Clear space front and above) and labeled to show which area is affected by each circuit breaker?	YES	NO	N/A	12. Are piles of paper, trash, etc., in and around your building/space, picked up and disposed of regularly?	YES	NO	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>If NO, date corrected</i>				<i>If NO, date corrected</i>		
5. Are circuit breakers clear of any tape, string or wire that would affect their operation? Do empty breaker spaces have KNOCKOUT FILLER PLATES?	YES	NO	N/A	13. Do you have a fire extinguisher in your business? The minimum required is a 2A10BC (refer to label on extinguisher).	YES	NO	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>If NO, date corrected</i>				<i>If NO, date corrected</i>		
6. Is the cover on the electrical panel and face plates installed on all electrical outlets and switches?	YES	NO	N/A	14. Have all fire extinguishers been inspected, tagged and serviced within the last year by a fire extinguisher company licensed by the State Fire Marshal?	YES	NO	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>If NO, date corrected</i>				<i>If NO, date corrected</i>		
7. Are extension cords being used for more than portable appliances? Do they run through walls, ceilings, floors, under doors or floor coverings? Are they affixed to the building/space?	YES	NO	N/A	15. Is a fire extinguisher mounted or secured on a wall (preferably near an exit) so that the top of the extinguisher is not more than 5 ft. above the floor?	YES	NO	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>If YES, date corrected</i>				<i>If NO, date corrected</i>		
8. Is the building/space electrical in good condition? Inspect broken switches and outlets, unsupported light fixtures.	YES	NO	N/A	16. Are all fire extinguishers visible and readily accessible for use (not blocked by storage, etc.)?	YES	NO	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>If NO, date corrected</i>				<i>If NO, date corrected</i>		
					<i>Located no more than 75 feet of travel from anywhere in Business.</i>		



17. Are exit(s) clearly marked with lighted exit signs? Are back-up batteries working?	<table border="1"> <tr> <td>YES</td> <td>NO</td> <td>N/A</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">If NO, date corrected</td> </tr> </table>	YES	NO	N/A				If NO, date corrected			24. Does the Storage exceed 12 feet in height? <i>Storage exceeding 12 feet in height requires a High-piled Storage Permit from the San Bernardino County Fire Department.</i>	<table border="1"> <tr> <td>YES</td> <td>NO</td> <td>N/A</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">If NO, date corrected</td> </tr> </table>	YES	NO	N/A				If NO, date corrected		
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18. Are all exit aisles, hallways, doorways, stairways, landings, corridors and walkways clear of any obstructions?	<table border="1"> <tr> <td>YES</td> <td>NO</td> <td>N/A</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">If NO, date corrected</td> </tr> </table>	YES	NO	N/A				If NO, date corrected			25. Is the storage at least 24 inches below the ceiling in buildings without fire sprinklers? In buildings with fire sprinklers, is the storage at least 18 inches below the fire sprinkler head?	<table border="1"> <tr> <td>YES</td> <td>NO</td> <td>N/A</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">If NO, date corrected</td> </tr> </table>	YES	NO	N/A				If NO, date corrected		
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19. Does the main entry door to the business have a keyed deadbolt on the interior side of the door with signage attached that reads: "THIS DOOR TO REMAIN UNLOCKED WHEN THIS SPACE IS OCCUPIED" ?	<table border="1"> <tr> <td>YES</td> <td>NO</td> <td>N/A</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">If NO, date corrected</td> </tr> </table>	YES	NO	N/A				If NO, date corrected			26. Are any fire sprinkler heads painted?	<table border="1"> <tr> <td>YES</td> <td>NO</td> <td>N/A</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">If NO, date corrected</td> </tr> </table>	YES	NO	N/A				If NO, date corrected		
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20. Are handrails installed on all stairways? Are the handrails in good condition?	<table border="1"> <tr> <td>YES</td> <td>NO</td> <td>N/A</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">If NO, date corrected</td> </tr> </table>	YES	NO	N/A				If NO, date corrected			27. Are ALL fire sprinkler escutcheons (trim rings) in place?	<table border="1"> <tr> <td>YES</td> <td>NO</td> <td>N/A</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">If NO, date corrected</td> </tr> </table>	YES	NO	N/A				If NO, date corrected		
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21. For Assembly Uses, is the Occupancy Capacity sign properly displayed and is correct for the current business use?	<table border="1"> <tr> <td>YES</td> <td>NO</td> <td>N/A</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">If NO, date corrected</td> </tr> </table>	YES	NO	N/A				If NO, date corrected			28. Are there any holes in the ceiling or walls? <i>Holes in ceilings and walls will compromise the fire safety construction for the building. Please contact the Building Safety Department for guidance on the repair of holes.</i>	<table border="1"> <tr> <td>YES</td> <td>NO</td> <td>N/A</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">If NO, date corrected</td> </tr> </table>	YES	NO	N/A				If NO, date corrected		
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22. Is the building/space accessible from the entry door to the service counter and through aisles, hallway and door openings, dressing rooms and extending to an accessible bathroom?	<table border="1"> <tr> <td>YES</td> <td>NO</td> <td>N/A</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">If NO, date corrected</td> </tr> </table>	YES	NO	N/A				If NO, date corrected				<table border="1"> <tr> <td>YES</td> <td>NO</td> <td>N/A</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">If NO, date corrected</td> </tr> </table>	YES	NO	N/A				If NO, date corrected		
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23. Are bathrooms in compliance with ADA requirements? <i>An ADA Accessibility Handout is available from the Building Safety Department.</i>	<table border="1"> <tr> <td>YES</td> <td>NO</td> <td>N/A</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">If <u>YES</u>, date corrected</td> </tr> </table>	YES	NO	N/A				If <u>YES</u> , date corrected				<table border="1"> <tr> <td>YES</td> <td>NO</td> <td>N/A</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">If NO, date corrected</td> </tr> </table>	YES	NO	N/A				If NO, date corrected		
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